

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For an Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Jan 31 9 00 AM '99

<b>C00236513</b> <b>ARNOLD LINHARDT</b> <b>ENGEL FOR CONGRESS</b> <b>462 CALIFORNIA RD.</b> <b>BRONXVILLE, NY 10708</b>	<b>XXXXXXXXXXXX</b> <b>2. FEC IDENTIFICATION NUMBER</b> <b>C00236513</b> <b>3. IS THIS REPORT AN AMENDMENT</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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**4. TYPE OF REPORT**

- |   |   |
|---|---|
| <input type="checkbox"/> April 15 Quarterly Report<br><input type="checkbox"/> July 15 Quarterly Report<br><input checked="" type="checkbox"/> October 15 Quarterly Report<br><input type="checkbox"/> January 31 Year End Report<br><input type="checkbox"/> July 31 Mid-Year Report | <input type="checkbox"/> Twelfth day report preceding<br>election on _____ in the State of _____<br><input type="checkbox"/> Thirtieth day report following the General Election on<br>_____ in the State of _____<br><input type="checkbox"/> Termination Report |
|---|---|
- activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

**SUMMARY**

5. Covering Period <u>08-27-98</u> through <u>09-30-98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (from Line 11(e))	\$41,840.00	\$221,842.82
(b) Total Contribution Refunds (from Line 20(d))		\$250.00
(c) Net Contributions (Line 6(b) from Line 6(a))	\$41,840.00	\$221,592.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$63,406.53	\$159,439.27
(b) Total Offsets to Operating Expenditures (from 14)		
(c) Net Operating Expenditures (Line 7(a) - Line 7(b))	\$63,406.53	\$159,439.27
8. Cash on Hand at Close of Reporting Period (Line 27)	\$132,528.10	
9. Debts and Obligations Owed TO the Committee		
10. Debts and Obligations Owed BY the Committee	\$20,000.00	

Federal Election  
Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530

I certify that I have examined this report and it is correct and complete.

Type or Print Name of Treasurer  
**DEBBY LINHARDT**

Signature of Treasurer

*Debbie Linhardt*

Date

11/27/99

NOTE: Submission of false, erroneous, or incomplete information may subject signer to penalties

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FEC FORM 3